



MEMBER DISCOUNT SERVICES MANGO LANGUAGES

Institution: _____ OCLC Symbol: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Title: _____

Telephone: _____ Fax: _____

Email: _____

Requested Start Date: _____ Library Price Quote: _____

Provide User Count:

- University / 4-year college (FTE Count) _____
- Community / 2-year college (FTE Count) _____
- Public Library (Population Count) _____
- Secondary School (Student Count) _____

Payment Options and Institution's Authorization (Please check one):

- Invoice institution per standard Amigos policies and procedures.
- Deduct from institution's OCLC Network Deposit Account.
- Deduct from institution's Member Discount Services Deposit Account.

Purchase order number, if required by institution (*not required by Amigos*): _____

Authorizing Signature: _____

Title: _____ Date: _____

Cancellation Policy: Cancellation with refund only within the first 30 days of the subscription period.

Please return via e-mail or fax to: Carol Wattenbarger, Amigos Member Discount Services
Fax: 972/991-6061; Phone: 1-800-843-8482 ext. 2802, or wattenbarger@amigos.org.